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**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 8
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

ADDRESS
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TITLE
SYSTEM FOR APPRAISING LIFE INSURANCE AND ANNUITIES

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Case
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